HAND, FOOT, & MOUTH DISEASE

What is hand, foot, and mouth disease?

Hand, foot, and mouth disease (HFMD) is a common illness among infants and children. It is most commonly caused by the coxsackievirus A16 and enterovirus 71. It is most common in the summer and early fall.

What are the symptoms?

In many people, infection with the virus causes mild or no symptoms. Symptoms include sores in the mouth followed by a rash of tiny painful blisters on the hands and feet. Symptoms may also include mild fever, sore throat and stomach ache. The fluid in the blisters contains the virus, and symptoms may last for seven to ten days. The infection usually goes away without any serious complications.

How is it spread?

The virus can be passed through saliva, through the fluid from blisters on the hands and feet, or through the infected person's stool (bowel movement). A person is most contagious during the first week of the illness. The time between becoming infected and the start of symptoms is between 3 and 6 days. It is not transmitted to or from pets or other animals. HFMD can affect anyone; however, most cases occur in children under 10 years old.

Diagnosis and Treatment:

A physician usually distinguishes HFMD from other causes of mouth sores by the age of the patient, the symptoms reported, and the appearance of the rash and the sores. A throat swab or stool specimen is possible, but since the test takes 2 to 4 weeks to provide an answer it is usually not done.

No specific treatment is available for hand, foot, and mouth disease. Symptoms may be treated to provide relief from fever, aches, or pain from the mouth ulcers.

Exclusion Guidelines for Child Care:

Children with HFMD do not need to stay home as long as they are feeling well enough to participate. Exclusion may not prevent additional cases since the virus may be excreted for weeks after the symptoms have disappeared and some persons may have no symptoms. However, some benefit may be gained by excluding children who have blisters in their mouths and drool, or those who have weeping lesions on their hands that cannot be covered. If a child is particularly uncomfortable, some rest at home might be needed. Outbreaks in child care facilities usually coincide with an increased number of cases in the community.

How can the spread of HFMD be reduced?

- Thorough hand washing is your best prevention.
- Clean and disinfect surfaces (such as diapering areas and nap mats) that may be soiled with body fluids or secretions. A fresh solution of 1 tablespoon unscented chlorine bleach to 1 quart of water is effective.
- Notify parents and staff members if an outbreak occurs in your child care setting.
 (Confidentiality of the individuals should be maintained.)